

CITY OF LAUDERHILL – INTERNAL APPLICATION FORM

| APPLICATION #: | (Human Resources Use Only) | | | | |
|---|---|--|--|--|--|
| Date: Positi | Position Applying For: | | | | |
| Department: | _ | | | | |
| Last Name: | First Na | me: | | | |
| Home Address: | | | | | |
| City: | _ State: _ | Zip C | ode: | | |
| Cell/Home Phone Number: | Work Pl | none Number: | | | |
| Are you available to work shifts? YES | □ NO | | | | |
| Weekends? | | | | | |
| Highest Grade Completed/GED: | Degree: | Major: | | | |
| Valid Florida Driver's License? ☐ YES ☐ 1 | NO Driver's Li | cense Number: | | | |
| Class: Endorsement: | (| Certificate/License: | | | |
| WORK HISTORY : Please list ALL employmetime. Account for all periods, including unemployensition was held, please list each position separate enter that name in the right hand margin. Please relevant work history and a copy of all required Coreviewed. | oyment and servicately. If you wer attach additional | ce in the Armed Forces. In the employed under a different job history sheets if necessity. | f more than or ent name, pleas sary. Include a | | |
| Current Employment | | Dates Employed: | | | |
| Address (Number and Street) | | From: | Го: | | |
| | | Your Job Title: | | | |
| City State | Zip Code | Hours Worked Per V | Veek: | | |
| Supervisor's Name: | | Salary: Start \$ | Per: | | |
| Reason For Leaving: | | End \$ | Per: | | |
| Duties: | | | | | |
| | | | | | |

Continue Work History on Reverse Side Revised (1/27/14)

| Last Name: | | First Nan | ne: | |
|---|-------|-----------------|------------------------|-------|
| Past Employment: | | Dates Employed: | | |
| Address (Number and Street) | | | From: | То: |
| | | | Your Job Title: | |
| City | State | Zip Code | Hours Worked Per Week: | |
| Supervisor's Name: | | | Salary: Start \$ | Per: |
| Reason for Leaving: | | | End \$ | Per: |
| Duties: | | | | |
| Past Employment: | | | Dates Employed: | |
| Address (Number and Street) | | | From: To: | |
| | | | Your Job Title: | |
| City | State | Zip Code | Hours Worked Per Week: | |
| Supervisor's Name: | | | Salary: Start \$ | Per: |
| Reason For Leaving: | | | End \$ | Per: |
| Duties: | | | | |
| | | | | |
| Past Employment: | | | Dates Employed: | |
| Address (Number and Street) | | | From: | To: |
| | | | Your Job Title: | |
| City | State | Zip Code | Hours Worked Per | Week: |
| Supervisor's Name: | | | Salary: Start \$ | Per: |
| Reason For Leaving: | | | End \$ | Per: |
| Duties: | | | | |
| Past Employment: | | | Dates Employed: | |
| Address (Number and Street) | | | From: | То: |
| | | | Your Job Title: | |
| City | State | Zip Code | Hours Worked Per Week: | |
| Supervisor's Name: | | | Salary: Start \$ | Per: |
| Reason For Leaving: | | | End \$ | Per: |
| Duties: | | | | |
| I certify that the information contains falsification of this application in any City of Lauderhill Personnel Policy. | | | | |
| Employee Signature: | | | Date: | |